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| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).<br><h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">For FY 2009</h2> |      | <b>Complete if Known</b><br>Application Number 10/535,508-Conf. #7230<br>Filing Date December 16, 2005<br>First Named Inventor Roberto Angelo Motterlini<br>Examiner Name A. Soroush<br>Art Unit 1616<br>Attorney Docket No. H0817.70001US00 |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |      |  |  |
| TOTAL AMOUNT OF PAYMENT  | (\$) | 180.00   |  |

|  |  |
|--|--|
| <b>METHOD OF PAYMENT</b> (check all that apply)  |  |
| <input type="checkbox"/> Check<br><input type="checkbox"/> Deposit Account   | <input checked="" type="checkbox"/> Credit Card<br><input type="checkbox"/> Money Order<br><input type="checkbox"/> None<br><input type="checkbox"/> Other (please identify): _____<br>Deposit Account Number: 23/2825<br>Deposit Account Name: Wolf, Greenfield & Sacks, P.C. |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |  |
| <input type="checkbox"/> Charge fee(s) indicated below<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee<br><input checked="" type="checkbox"/> Credit any overpayments   |

### FEE CALCULATION

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 330         | 165                   | 540         | 270                   | 220              | 110                   |                |
| Design           | 220         | 110                   | 100         | 50                    | 140              | 70                    |                |
| Plant            | 220         | 110                   | 330         | 165                   | 170              | 85                    |                |
| Reissue          | 330         | 165                   | 540         | 270                   | 650              | 325                   |                |
| Provisional      | 220         | 110                   | 0           | 0                     | 0                | 0                     |                |

| 2. EXCESS CLAIM FEES                               |  | Small Entity |          |
|--|--|--------------|----------|
| Fee Description                                    |  | Fee (\$)     | Fee (\$) |
| Each claim over 20 (including Reissues)            |  | 52           | 26       |
| Each independent claim over 3 (including Reissues) |  | 220          | 110      |
| Multiple dependent claims                          |  | 390          | 195      |

|  |                     |                 |                      |                                  |                      |
|--|---------------------|-----------------|----------------------|----------------------------------|----------------------|
| <u>Total Claims</u>  | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> |                      |
| _____ - 20 or HP   | _____ x _____       | = _____         | _____                | <u>Fee (\$)</u>                  | <u>Fee Paid (\$)</u> |
| HP = highest number of total claims paid for, if greater than 20.      |                     |                 |                      |                                  |                      |
| <u>Indep. Claims</u>   | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |                                  |                      |
| _____ - 3 or HP = _____  | _____ x _____       | = _____         | _____                |                                  |                      |
| HP = highest number of independent claims paid for, if greater than 3. |                     |                 |                      |                                  |                      |

| 3. APPLICATION SIZE FEE   |              |  |                                |               |  |
|---|--------------|--|--------------------------------|---------------|--|
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |              |  |                                |               |  |
| Total Sheets  | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$)                       | Fee Paid (\$) |  |
| - 100   | =            | /50 =  | (round up to a whole number) x |               |  |

| 4. OTHER FEE(S)   |  | Fee Paid (\$) |
|---|--|---------------|
| Non-English Specification, \$130 fee (no small entity discount)                             |  |               |
| Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement |  | 180.00        |

|                   |                       |                                   |                   |
|-------------------|-----------------------|-----------------------------------|-------------------|
| SUBMITTED BY      |                       |                                   |                   |
| Signature         | <i>Roque El-Hayek</i> | Registration No. (Attorney/Agent) | 55,151            |
| Name (Print/Type) | Roque El-Hayek        | Telephone                         | 617.646.8000      |
|                   |                       | Date                              | February 20, 2009 |

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|---|--|
| Certificate of Electronic Filing Under 37 CFR 1.8<br>I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).<br>Dated: February 20, 2009<br>Signature: <i>Donelle Calder</i> |  |
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